AO 440 (Rev. 06/12) Summons in a Civil Action

United States District Court

for the

District of South Carolina

NOVO NORDISK A/S AND NOVO NORDISK INC.)))
Plaintiff(s) V.) Civil Action No. 6:25-cv-443-TMC
PUSH MED, LLC)))
Defendant(s)	

SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) PUSH MED, LLC c/o John M. Mussetto, as Registered Agent 406 Pettigru Street Greenville, South Carolina 29601

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

T. Richmond McPherson, III Bowman and Brooke LLP 1942 East 7th Street, Suite 360 Charlotte, North Carolina 28204

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: _____01/24/2025



CLERK OF COURT

s/Kay McAlister
Deputy Clerk

Signature of Clerk or Deputy Clerk

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Civil Action No. 6:25-cv-443-TMC

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

Was ra	This summons for (nan ceived by me on (date)	ne of individual and title, if any)				
was re	cerved by me on (aate)	· · ·				
	☐ I personally served the summons on the individual at (place)					
			on (date)			
	☐ I left the summons at the individual's residence or usual place of abode with (name)					
	on (date), a person of suitable age and discretion who resides there, on (date), and mailed a copy to the individual's last known address; or					
	☐ I served the summons on (name of individual) , who designated by law to accept service of process on behalf of (name of organization)					
			on (date)	; or		
	☐ I returned the sumn	nons unexecuted because		; or		
	☐ Other (specify):					
	My fees are \$	for travel and \$	for services, for a total of \$	0.00		
	I declare under penalty	y of perjury that this information	is true.			
Date:						
Date.			Server's signature			
			Printed name and title			
			Server's address			

Additional information regarding attempted service, etc: